VIII. Membership of the IACUC

Date: 15 December 2020)				
Name of Institution: V	/alley Biosystems				
Assurance Number: [)16-00723 (A4457-0)1)			
IACUC Chairperson					
Name*: Stephen Cello					
Title*: Director of Animal Program & Facilities			Degree/Credentials*	: BS, AALAS Technologist	
Address*: (street, city, st	tate, zip code)				
1265 Triangle Court, We	st Sacramento, CA 9	560	5		
E-mail*: s.cello@valleybiosystems.com					
Phone*:			Fax*	-, (-)	
IACUC Roster					
Name of Member/ Code**	Degree/ Credentials	Pos	ition Title***	PHS Policy Membership Requirements****	
Stephen Cello	BS AALAS Technologist		ector of Animal gram & Facilities	Scientist	
			(b) (6)	Scientist	
				Non-Affiliated Member and Non Scientist	
				Scientist	
				Veterinarian/Scientist	
				Veterinarian	
Kriscelle Mendoza	DVM	Vet	erinarian	Veterinarian	
			(b) (6)	Veterinarian/Scientist	

Veterinarian with training or experience in laboratory animal science and

medicine or in the use of the species at the institution, who has direct or delegated program authority and responsibility for activities involving animals

at the institution.

Scientist practicing scientist experienced in research involving animals.

Nonscientist member whose primary concerns are in a nonscientific area (e.g., ethicist,

lawyer, member of the clergy).

Nonaffiliated individual who is not affiliated with the institution in any way other than as a

member of the IACUC, and is not a member of the immediate family of a person who is affiliated with the institution. This member is expected to represent general community interests in the proper care and use of animals and should not be a laboratory animal user. A consulting veterinarian may not

be considered nonaffiliated.

[Note: all members must be appointed by the CEO (or individual with specific written delegation to appoint members) and must be voting members. Non-voting members and alternate members must be so identified.]

X. Facility and Species Inventory

^{*} This information is mandatory.

^{**} Names of members, other than the chairperson and veterinarian, may be represented by a number or symbol in this submission to OLAW. Sufficient information to determine that all appointees are appropriately qualified must be provided and the identity of each member must be readily ascertainable by the institution and available to authorized OLAW or other PHS representatives upon request.

^{***} List specific position titles for all members, including nonaffiliated (e.g., banker, teacher, volunteer fireman; not "community member" or "retired").

^{****} PHS Policy Membership Requirements:

Date: 15 December 202	0				
Name of Institution:	Valley Biosystems				
Assurance Number: D16-00723 (A4457-01)					
Laboratory, Unit, or Building*	Gross Square Feet [include service areas]	Species Housed [use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog]	Approximate Average Daily Inventory		
(b) (30,500 sf	Rhesus & cynomolgus macaques	550		

 $^{^*}$ Institutions may identify animal areas (buildings/rooms) by a number or symbol in this submission to OLAW. However, the name and location must be provided to OLAW upon request.